Instead, we have to rely on the reconciliation process in order to bypass Democratic obstructionism in the Senate, and this only allows us to repeal parts of ObamaCare and enact only parts of a replacement. Finishing the job will require administrative actions and followup legislation in the Senate, both somewhat speculative enterprises. So we need to ask if this bill alone is enough to produce a better healthcare system for the vast majority of people.

Its biggest defects are its failure to restore to consumers the failure to shop across State lines and to fully free consumers from having to purchase coverage they don't need and don't want. I am afraid in States that have insurance commissioners who refuse to approve innovative replacement plans, consumers will be stuck in a market still governed by ObamaCare mandates. This will require followup measures.

Critics cite the Congressional Budget Office estimate that 24 million Americans will lose their coverage, but this conclusion is largely based on the premise that unless people are forced to buy health insurance they won't. In fact, people won't buy health insurance that is not a good value for them; and, clearly, they believe ObamaCare isn't.

We envision a vigorous buyer's market where plans across the country compete to offer consumers better services at lower costs, tailored to their own needs and wants. This is the AHCA's biggest achievement: replacing coercion with choice for every American.

It ends the individual mandate that forces Americans to buy products they don't want. It ends the employer mandate that has trapped many low-income workers in part-time jobs.

It begins to restore consumers' freedom of choice, the best guarantee of quality and value in any market.

It allows Americans to meet more of their healthcare needs with pretax dollars

It relieves the premium base of the enormous cost of preexisting conditions by moving them to a block-granted, assigned risk pool.

In making this transition, though, it is important to leave no one in the lurch, and that is where we need to heed the CBO's warning. The fact that many low-income families could no longer afford basic health care is what produced ObamaCare in the first place.

Now, when fully implemented, our reforms will correct the government mandates that trapped people in restricted markets that forced health care out of reach. But until then, the CBO warns that a 64-year-old, for example, earning \$26,500 will see her out-of-pocket health costs balloon from \$1,700 to \$14,600 per year. This is neither morally defensible nor politically sustainable.

The Budget Committee adopted my motion, on a bipartisan vote, to ask the House to correct this inequity by adjusting the tax credits to assure that health plans are within the financial

reach of every family. I want to thank the leadership for responding to this motion by creating architecture in the bill to shift an additional \$75 billion for this purpose.

As our pro-growth economic reforms cause incomes to rise and our healthcare reforms bring healthcare costs down, families will be earning more and will be paying less of what they earn for their health care, and reliance on these tax credits will recede.

But we need a bridge from the present to the future, and we simply can't get there without addressing the bill's initial impact on older, low-income Americans.

It is also important that we assure stability in the Medicaid system as we transition to flexible, State-run programs that correct the inequities of ObamaCare that have pushed the elderly, blind, and disabled to the back of the Medicaid line. This bill does so.

I wish it did everything necessary to restore an optimal health insurance market, but it moves us toward that goal. And even as a stand-alone measure, I am confident that it will ultimately create a market in most States that will produce better services, greater choices, and lower costs for the vast majority of Americans.

THE AFFORDABLE CARE ACT HAS IMPROVED AMERICAN LIVES

The SPEAKER pro tempore. The Chair recognizes the gentleman from New York (Mr. JEFFRIES) for 5 minutes.

Mr. JEFFRIES. Mr. Speaker, this is a monumental week here on Capitol Hill as we will decide the fate of health care in America.

Despite the evidence that the Affordable Care Act has made a positive difference in the lives of everyday Americans, Republicans are set to destroy it. But the Affordable Care Act has improved the quality of life for tens of millions of people all across this country.

As a result of the Affordable Care Act, people born with preexisting conditions can no longer be denied health insurance.

As a result of the Affordable Care Act, young people can remain on their parents' health insurance all the way through to the age of 26.

As a result of the Affordable Care Act, women can no longer be discriminated against with respect to the issuance of insurance simply based on their gender.

As a result of the Affordable Care Act, seniors are paying less for life-saving prescription drug medication.

As a result of the Affordable Care Act, more than 1 million people throughout this country—including in rural America—are able to receive substance abuse treatment because of them being caught up in the opioid addiction epidemic.

The Affordable Care Act has made a positive difference in the lives of every-day Americans, yet this President says

it has been a disaster. This is the same President who, for 5 years, perpetrated the racist lie that Barack Obama was not born in the United States of America, who said that he received more votes than Hillary Clinton, who claimed that there were more people at the inauguration than in 2009. This is an individual who still maintains that his predecessor, Barack Obama, committed a felony and ordered a wiretap, despite testimony from the FBI Director to the contrary.

Let's be clear. What will be an unmitigated disaster is TrumpCare, which House Republicans are working to jam down the throats of the American people.

TrumpCare, the Republican healthcare plan, will result in 24 million Americans losing their health care.

TrumpCare, the Republican plan, will gut Medicaid, stripping it of \$880 billion, taking dead aim at seniors, the poor, and the afflicted.

TrumpCare will impose an age tax on people between the ages of 50 and 64, causing some in that category who are currently paying approximately \$1,700 per year to pay close to \$14,000 in age tax—on people between 50 and 64.

□ 1045

That is TrumpCare, the Republican plan, an unmitigated disaster taking dead aim at the American people. It will result in tens of thousands of Americans dying. It is a death sentence. Seniors will die. The poor will die. The chronically ill will die. Rural Americans will die. People between the age of 50 and 64 will die. And the executioner will be the authors and those who support the Republican healthcare plan.

The SPEAKER pro tempore. Members are reminded to refrain from engaging in personalities toward the President.

MNIKESA'S ACA TESTIMONY

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from Connecticut (Ms. DELAURO) for 5 minutes.

Ms. DELAURO. Mr. Speaker, I rise today to share the testimony of one of my constituents. Her name is Mnikesa Whitaker-Haaheim. She is a fifth-generation, college-educated woman, founder of Ballet Haven, a rigorous dance training program. She is an English teacher who has won the Teacher of the Year award twice. And I regret to tell you that she is also living with and dying from a debilitating disease, and these are her words:

"The debate about healthcare has turned into something of a spectacle—as if it exists apart from the flesh and bones that are experiencing the consequences of the decisions being made. I think it is exceedingly important to talk about the felt experience of ill-

"The feeling like an elephant's sitting on my chest—daily—because I